



Effective on 12/08/2004 Fees pursuant to Consolidated Appropriations Act, 2005 (H.R. 4131)		Complete if Known					
FEE TRANSMITTAL For FY 2005		Application Number	09/903,825				
		Filing Date	July 11, 2001				
		First Named Inventor	Robert E. Duthie, Jr.				
		Examiner Name	E.L. McKane				
		Art Unit	1744				
■ Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	35553.0000				
TOTAL AMOUNT OF PAYMENT (\$250.00)							
METHOD OF PAYMENT (check all that apply)							
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____							
■ Deposit Account Deposit Account Number: <u>08-2442</u> Deposit Account Name: <u>Hodgson Russ LLP</u>							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee							
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Credit any overpayments							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Small Entity		Small Entity		Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent						50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
29	-20 or HP = 9	x 25	225		Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
-3 or HP = _____		x _____	= _____				
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
- 100 = _____	/ 50 = _____	(round up to a whole number) x _____		= _____			
4. OTHER FEE(S)							Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)							_____
Other: <u>Notice of Appeal</u>							<u>\$250.00</u>

SUBMITTED BY			
SIGNATURE		Registration No. (Attorney/Agent) 24,926	Telephone 716-856-4000
NAME (Print/Type)	Martin G. Linihan	Date May 2, 2005	

I hereby Certify that this Correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on May 2, 2005.

Martin G. Linihan
Name

Signature

May 2, 2005
Date of Signature

AFL 1744
JFWNOTICE OF APPEAL FROM THE EXAMINER TO THE
BOARD OF PATENT APPEALS AND INTERFERENCESDocket Number
35553.0000

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450

on May 2, 2005

Signature

Typed or

Printed Name Martin G. Linihan

In re Application of Robert E. Duthie, Jr.

Application Number 09/903,825

Filed July 11, 2001

For Micro-Organism Reduction In Liquid By Use Of A Metal Halide
Ultraviolet Lamp

Group Art Unit 1744

Examiner E.L. McKane

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b))

\$ 500.00

- ☒ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:

\$ 250.00

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 08-2442. I have enclosed a duplicate copy of this sheet.

☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

- ☐ applicant/inventor
☐ assignee of record of the entire interest.
 (See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
☒ attorney or agent of record.
 Registration number _____
☐ attorney or agent acting under 37 CFR 1.34(a)
 Registration number if acting under 37 CFR 1.34(a). _____

Signature

Martin G. Linihan

Typed or printed name

716-848-1367

Telephone Number

May 2, 2005

Date

NOTE: Signatures of all the inventors of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.

☐ Total of _____ forms are submitted.

1238831

05/06/2005 RMEBRAFT 00000001 082442 09903825

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